



Insurance Companies

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COMMITTEE FOR RESPONSIBLE FEDERAL GOVERNMENT

Multi-Candidate Committee

July 18, 2003

Federal Election Commission
Public Records Office
999 E Street N.W.
Washington, D. C. 20463

Enclosed are the following reports for the period January 1, 2003 through June 30, 2003.

- Report of Receipts and Disbursements
- Summary Page of Receipts and Disbursements
- Detailed Summary Page – Receipts
- Detailed Summary Page – Disbursements
- Schedule A
- Schedule B

Bruce G. Kelley
Treasurer

BGK/sb
Enc.



2003-07-18 10:02 AM

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
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2003 JUL 29 4 10 02

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

Employers Mutual Casualty Company Committee for Responsible Federal Government

ADDRESS (number and street) 317 Mulberry Street

Check if different than previously reported. (ACC)

Des Moines IA 50309

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**

C 00163873 **IS THIS REPORT** **NEW (N)** **OR** **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election Report for the:**

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on 07 30 2003 in the State of IA

(d) 30-Day **POST-Election Report for the:**

General (30G) Runoff (30R) Special (30S)

Election on 07 30 2003 in the State of IA

5. Covering Period 01 01 2003 through 06 30 2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bruce G. Kelley

Signature of Treasurer *Bruce G. Kelley* Date 07 18 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Report Covering the Period: From 01 01 2003 To 06 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2003		1,715.80
(b) Cash on Hand at Beginning of Reporting Period	1,715.80	
(c) Total Receipts (from Line 19)	2,562.61	2,562.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,278.41	4,278.41
7. Total Disbursements (from Line 30)	2,175.00	2,175.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2,103.41	2,103.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

This committee has qualified as a multicandidate committee. (see FEC FORM 118)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-894-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Revised 1/07)

Page 3

Name or Type of Committee

Employers Mutual Casualty Company Committee for Responsible Federal Government

Report Covering the Period: From: 01/01/2003 To: 06/30/2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Unitemized	487.19	
(ii) Itemized	2,075.42	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	2,562.61	2,562.61
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	2,562.61	2,562.61
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	2,562.61	2,562.61
20. Total Federal Receipts (subtract Line 18 from Line 19)	2,562.61	2,562.61

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,175.00	2,175.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H5)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2,175.00	2,175.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(i) from Line 31)	2,175.00	2,175.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2,562.61	2,562.61
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2,562.61	2,562.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Full Name (Last, First, Middle Initial) A. Bruce G. Kelley		Payroll Deductions - See Date of Receipt Attached 0000
Mailing Address 14 Glenview Dr		
City Des Moines, IA	State IA	Zip Code 50312
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 249.99
Name of Employer EMC Insurance Companies	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) B. David O. Narigon		Payroll Deductions - See Date of Receipt Attached 0000
Mailing Address Box 308		
City Monroe	State IA	Zip Code 50170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 107.20
Name of Employer EMC Insurance Companies	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 107.20	

Full Name (Last, First, Middle Initial) C. Georgia Rhoades		Payroll Deductions - See Date of Receipt Attached 0000
Mailing Address 3633 Cornell		
City Des Moines	State IA	Zip Code 50313
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer EMC Insurance Companies	Occupation DF-Commercial Systems	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

SUBTOTAL of Receipts This Page (optional)	487.19
TOTAL This Period (last page this line number only)	487.19

1/3/03
 1/7/03
 1/31/03
 2/14/03
 2/22/03
 3/14/03
 3/23/03
 4/11/03
 4/20/03
 5/4/03
 5/25/03
 6/10/03
 6/20/03

Bruce Bellman

1/5/03
 1/7/03
 1/31/03
 2/14/03
 2/22/03
 3/14/03
 3/23/03
 4/11/03
 4/20/03
 5/4/03
 5/25/03
 6/10/03
 6/20/03

Gregory Khachat

1/3/03
 1/7/03
 1/31/03
 2/14/03
 2/22/03
 3/14/03
 3/23/03
 4/11/03
 4/20/03
 5/4/03
 5/25/03
 6/10/03
 6/20/03

David Narigon

2003 08 23 11:05 AM 04 07 00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of line Detailed Summary Page		FOR LINE NUMBER: (check only one)				PAGE 1 OF 1	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **Employers Mutual Casualty Company Political Action Committee for Responsible State Government**

A.

Full Name (Last, First, Middle Initial) **Boswell for Congress**

Date of Disbursement **03 21 2003**

Mailing Address **P. O. Box 35398**

City **Des Moines** State **IA** Zip Code **50315**

Purpose of Disbursement **Campaign Contribution** **1011** Category/Type

Candidate Name **Leonard Boswell**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period **50.00**

B.

Full Name (Last, First, Middle Initial) **ALLPAC**

Date of Disbursement **04 15 2003**

Mailing Address **3025 Highland Parkway, Suite 800**

City **Downers Grove** State **IL** Zip Code **60515**

Purpose of Disbursement **Contribution** **1011** Category/Type

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period **2,000.00**

C.

Full Name (Last, First, Middle Initial) **Boswell for Congress**

Date of Disbursement **06 13 2003**

Mailing Address **P. O. Box 35398**

City **Des Moines** State **IA** Zip Code **50315**

Purpose of Disbursement **Campaign Contribution** **1011** Category/Type

Candidate Name **Leonard Boswell**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period **125.00**

SUBTOTAL of Disbursements This Page (optional) **2,175.00**

TOTAL This Period (last page this line number only) **2,175.00**

11-03-03 10:00:00 AM

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>ALS</i>	<i>7-29-03</i>
PREPARER	DATE PREPARED